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| Under the Page | erwork Reducijon Act of 1995. | U.S. I no persons are required to respond to a co Application Number | A Petent and Tra Hection of infor | pproved fo demark Of matten uni | PTO/SB/21 (09-0a). or use through 07/31/2008. OMB 0651-0031 ffice; U.S. DEPARTMENT OF COMMERCE less it disclays a valid OMB control number. |
| | | Application Number | 09/698,378 | | RECEIVED) |
| TRA | ANSMITTAL | Filing Date | October 27, | 2000 | CENTRAL FAX CENTER |
| | FORM | First Named Inventor | William Kopi | aclewicz | |
| | 1 0100 | Art Unit | 1723 | | AUG 0 5 200 |
| (to be used for 8 | Il correspondence after initial fi | Examiner Name | Fortuna, Ani | в М. | |
| | Pages in This Submission 5 | i Attorney Docket Number | 550P002C3 | | |
| | | ENCLOSURES (Check all | I that epply) | | |
| | | | 1 | | After Allowance Communication to TC |
| Fee Transi | mittal Form | Drawing(s) | ļ | 느 | |
| √ Fe | e Attached | Licensing-related Papers | | , ليا | Appeal Communication to Board of Appeals and Interferences |
| □ . <i>.</i> | -4/Dk- | Petition | | | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| Amendme | пикеріу | Petition to Convert to a | İ | | Proprietary Information |
| Aft Aft | ter Final | Provisional Application Power of Attorney, Revocation | on | : | Proprietary information |
| L Aff | fidavits/declaration(s) | Change of Correspondence | | | Status Letter |
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| Express A | bandonment Request | | | | |
| Informatio | n Disclosure Statement | CD, Number of CD(s) | | | |
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| Certifled C | Copy of Priority | Remarks | | | |
| Reply to M | Missing Parts/ Le Application apply to Missing Parts ander 37 CFR 1.52 or 1.53 | Terminal Disclaimers for U.S. Paten | nt No. 6,048,4 | 157; 6,200 | 0,474; and 6,830,717 |
| | SIGNA | TURE OF APPLICANT, ATT | ORNEY, O | R AGE | ENT · |
| Firm Name | Nields & Lemack | | · | | |
| Signature | Me | | | | |
| Printed name | Kevin S. Lemack | | | | |
| Date | July 29, 2005 | | Reg. No. | 32,579 | |
| I hereby cartify th sufficient postage the date shown b | nat this correspondence is I e as first class mail in an er | ERTIFICATE OF TRANSMIS being facsimile transmitted to the USF ivelope addressed to: Commissioner | TO or depos | eited with | the United States Postal Service with 1450, Alexandria, VA 22313-1450 on |
| Signature | Bo | | | | |
| Typed or printed | name Kevin S. Lemac | k | | - | Date July 29, 2005 |

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PTO/SB/26 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| | DISCLAIMER TO OBVIATE A DOUBLE PATENTING REJECTION OVER A "PRIOR" PATENT | Docket Number (Optional) 550P002C3 |
| In re Application of: | William Kopaciewicz et al. | |
| Application No.: | 09/698,378 | |
| Filed: | October 27, 2000 | |
| For: | CAST MEMBRANE STRUCTURES FOR SAMPLE PREPARA | TION |
| except as provided bel the expiration date of the and 173, and as the te granted on the instant | ipore Corporation of 100 percent Interest in tow, the terminal part of the statutory term of any patent granted on the instant ne full statutory term prior patent No. 6, 200, 474 as the term of said rm of said prior patent is presently shortened by any terminal disclaimer. The capplication shall be enforceable only for and during such period that it and the pay patent granted on the instant application and is binding upon the grantee, its said the pay is a such period that it and the pay is a such particular to the pay is a such period that it and the pay is a such pay. | application which would extend beyond prior patent is defined in 35 U.S.C. 154 owner hereby agrees that any patent so prior patent are commonly owned. This |
| would extend to the ex patent is presently sho expires for fallure is held unenforces is found invalid by is statutorily discale has all claims cale is reissued; or | sclaimer, the owner does not disclaim the terminal part of the term of any pater biration date of the full statutory term as defined in 35 U.S.C. 154 and 173 of the rtened by any terminal disclaimer." In the event that said prior patent later: to pay a maintenance fee; table; a court of competent jurisdiction; ilmed in whole or terminally disclaimed under 37 CFR 1.321; celed by a reexamination certificate; | prior patent, "as the term of said prior |
| Check either box 1 or 2 | below, if appropriate. | |
| 1. For submissio etc.), the unde | ns on behalf of a business/organization (e.g., corporation, partnership, university raigned is empowered to act on behalf of the business/organization. | , government agenby. |
| belief are believed to be made are punishable to | the that all statements made herein of my own knowledge are true and that a se true; and further that these statements were made with the knowledge that by fine or imprisonment, or both, under Section 1001 of Title 18 of the United dize the validity of the application or any patent issued thereon. | willful false statements and the like so |
| 2. X The undersign | ned is an attorney or agent of record. Reg. No. 32,579 | |
| | Ma | I1 00 2005 |
| | Signature | July 29, 2005 Date |
| | Kevin S. Lemack | |
| | Typed or printed name | |
| | | 508-898-1818 |
| | | Telephone Number |
| X. Terminal dis | cialmer fee under 37 CFR 1.20(d) included. | |
| , 'b | VARNING: Information on this form may become public. Credit card information and authorization | ation should not on PTO-2028, |
| Form PTO/SB/96 may I | FR 3.73(b) is required if terminal disclaimer is signed by the assignee (owner). be used for making this certification. See MPEP § 324. | |

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*Statement_under 37 CFR 3.73(b) is required if terminal disclaimer is signed by the assignee (owner).

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| FEE TRANSMITTAL For FY 2005 Application Number 09/698.378 Filing Date 0ctoher. 27, 2000. First Named Inventor William Kopaciewicz Examiner Name Fortuna. Ana Art Unit 1723 TOTAL AMOUNT OF PAYMENT (\$) 390.00 Attorney Docket No. 550P002C3 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number. 14-0930 Deposit Account Name: Nields & Lemack For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below. except for the filling fee |
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| For FY 2005 First Named Inventor William Kopaciewicz Examiner Name Fortuna. Ana Art Unit 1723 TOTAL AMOUNT OF PAYMENT (\$) 390.00 Altorney Docket No. 550P002C3 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 14-0930 Deposit Account Name: Nields & Lemack For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) |
| Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 390.00 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 14-0930 Deposit Account Name: Nields & Lemack For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) |
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| FEE CALCULATION |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES |
| FILING FEES SEARCH FEES EXAMINATION FEES |
| Small Entity Small Entity Small Entity Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) |
| Utility 300 150 500 250 200 100 |
| Design 200 100 100 50 130 65 |
| Plant 200 100 300 150 160 80 |
| Reissue 300 150 500 250 600 300 |
| Provisional 200 100 0 0 0 0 |
| 2. EXCESS CLAIM FEES Small Entity |
| Fee Description Fach claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 |
| Multiple dependent claims 360 180 |
| Total Claims |
| - 20 or HP = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 |
| Indep. Claims Extra Claims Fee (5) Fee Paid (5) |
| -3 or HP = x = HP = highest number of Independent claims paid for, if greater than 3 |
| 3. APPLICATION SIZE FEE |
| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) |
| - 100 = /50 = (round up to a whole number) x |
| 4. OTHER FEE(S) |
| Non-English Specification, \$130 fee (no small entity discount) |
| Other: Statutory Disclaimer \$390.00 |
| SUBMITTED BY |
| Registration No. 32 570 Telephone 509 909 1919 |
| Name (Print/Type) Kevin S. Lemack Date July 29, 2005 |

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